				•	
Fill in this inf	ormation to ic	lentify your cas	se and this filing:		
Debtor 1	Arlene First Name	<b>Y.</b> Middle Name	<b>Blair</b> Last Name		
Debtor 2 (Spouse, if filing)	Errol First Name	<b>E.</b> Middle Name	Blair Last Name		
United States Ba	nkruptcy Court for	the: <b>SOUTHERN</b>	DISTRICT OF NEW YORK		
Case number (if known)	<u>17-11900-cgm</u>			_	t if this is an ded filing
Official Form		,			12/15
1. Do you own		or equitable intere	ding, Land, or Other Real		e an Interest In
1.1. <b>1325 E 233rd St</b> Street address, if avail		Check a	s the property? all that apply. gle-family home	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain	
		Col	plex or multi-unit building ndominium or cooperative	Current value of the entire property?	Current value of the portion you own?
Bronx City			nufactured or mobile home	\$419,000.00	\$419,000.00
Bronx County	State Zii	Inv	estment property neshare	Describe the nature of you interest (such as fee sim entireties, or a life estate	ple, tenancy by the
		Who ha	as an interest in the property?	Tenants by the entiret	у
		☐ Del ☐ Del ☑ Del	btor 1 only btor 2 only btor 1 and Debtor 2 only least one of the debtors and anoth	Check if this is comm (see instructions)	nunity property

Other information you wish to add about this item, such as local  $% \left\{ 1,2,\ldots ,n\right\}$ 

property identification number:

Debtor 1 Arlene Y. Blair Debtor 2 Errol E. Blair Case number (if known) 17-11900-cgm 1.2. What is the property? Do not deduct secured claims or exemptions. Put the Check all that apply. amount of any secured claims on Schedule D: 1337 E. 233rd Street ✓ Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home **Bronx** NY 10466 П \$362,000.00 \$362,000.00 ZIP Code City State Land Investment property Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by the **Bronx** entireties, or a life estate), if known. Other County Tenants by the entirety Who has an interest in the property? Check one. □ Debtor 1 only ☐ Check if this is community property (see instructions) Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 1.3. What is the property? Do not deduct secured claims or exemptions. Put the Check all that apply. amount of any secured claims on Schedule D: 4023 Dereimer Avenue Creditors Who Have Claims Secured by Property. Street address, if available, or other description Single-family home  $\square$ Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? 10466 Manufactured or mobile home \$456,292.00 \$456,292.00 **Bronx** NY City State ZIP Code Land Investment property  $\square$ Describe the nature of your ownership interest (such as fee simple, tenancy by the Timeshare **Bronx** entireties, or a life estate), if known. Other County Tenants by the entirety Who has an interest in the property? Check one. Debtor 1 only ☐ Check if this is community property (see instructions) Debtor 2 only 

Debtor 1 and Debtor 2 only

property identification number:

At least one of the debtors and another

Other information you wish to add about this item, such as local

	ne Y. Blair I E. Blair	Ca	ase number (if known) <u>17-1</u>	11900-cgm
1.4. Parcel of land (I in Marion Count	Marion Oaks, Unit 12) ty, Florida	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property?	
County		Manufactured or mobile home Land Investment property Timeshare Other	\$3,825.00  Describe the nature of your interest (such as fee sime entireties, or a life estate)	ple, tenancy by the
		Who has an interest in the property? Check one.	Tenants by the entiret	<u>y</u>
		<ul> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>☑ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>	Check if this is comm (see instructions)	nunity property
		Other information you wish to add abou property identification number:	t this item, such as local	
		ou own for all of your entries from Part 1, inc for Part 1. Write that number here	_	\$1,241,117.00
	scribe Your Vehicle			
3. Cars, vans, t	rucks, tractors, sport ut	ility vehicles, motorcycles		
3.1. Make:	Toyota	Who has an interest in the property?  Check one.	amount of any secured cla	
Model:	Sienna XLE	Debtor 1 only Debtor 2 only	Creditors Who Have Claim	
Year:	2004	Debtor 2 only  Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approximate milea	ige: 139,500	At least one of the debtors and anothe	sr <b>\$3,408.00</b>	\$3,408.00
Other information: 2004 Toyota Sig	enna XLE (approx.	☐ Check if this is community property		
139500 miles)		(see instructions)		
		ΓVs and other recreational vehicles, other ve sonal watercraft, fishing vessels, snowmobiles,		
✓ No ☐ Yes				
		ou own for all of your entries from Part 2, inc for Part 2. Write that number here	_	\$3,408.00
Part 3: De	scribe Your Person	al and Household Items		
Do you own or ha	ive any legal or equitabl	e interest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

	btor 1 Arlene Y. Blair btor 2 Errol E. Blair Case number (if known)	17-11900-cgm
6.	Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware  □ No  ▼ Yes. Describe Miscellaneous household goods and furnishing, including five beds, on	ne \$2,600.00
	dining room table and chairs, one sofa, and three side chairs	
7.	Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanner music collections; electronic devices including cell phones, cameras, media players, games	s;
	☐ No ☑ Yes. Describe Three televisions and one DVD player	\$1,600.00
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No ☐ Yes. Describe	
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis canoes and kayaks; carpentry tools; musical instruments	3;
	✓ No ☐ Yes. Describe	
10.	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes. Describe	
11.	Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☑ Yes. Describe See continuation page(s).	\$3,800.00
12.	Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gold, silver	gems,
	✓ No ☐ Yes. Describe	
13.	Non-farm animals  Examples: Dogs, cats, birds, horses	
	✓ No ☐ Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No  Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here	→ \$8,000.00
P	Part 4: Describe Your Financial Assets	
Do '	you own or have any legal or equitable interest in any of the following?	Current value of the

portion you own?
Do not deduct secured claims or exemptions.

	tor 1 Arlene Y. Blait tor 2 Errol E. Blair	r 	Case number (if known)	m
16.	Cash Examples: Money you h petition	ave in your wallet, in you	r home, in a safe deposit box, and on hand when you file your	
	□ No ☑ Yes		Cash:	\$60,000.00
17.		ouses, and other similar i	accounts; certificates of deposit; shares in credit unions, nstitutions. If you have multiple accounts with the same	
	□ No ✓ Yes	Institution i	name:	
	— 17.1. Checking a	ccount Citibank	checking account ending in 8860	\$2,550.00
	17.2. Savings ac		I credit union account ending in 7271	\$70,000.00
18.	<b>☑</b> No		n brokerage firms, money market accounts	
19.	an interest in an LLC, p  ✓ No  ✓ Yes. Give specific		orporated and unincorporated businesses, including inture	
	information about them	Name of entity:	% of ownership:	
20.	Negotiable instruments i	nclude personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	✓ No ☐ Yes. Give specific information about them	Issuer name:		
21.	Retirement or pension  Examples: Interests in II  profit-sharing	RA, ERISA, Keogh, 401(I	k), 403(b), thrift savings accounts, or other pension or	
	No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:	Prudential 401(k)	\$265,692.00
		401(k) or similar plan:	Jones Lang LaSalle 401(k)	\$114,633.84
		Pension plan:	Right to payments from pension plan	Unknown
		Retirement account:	Prudential 457 plan	\$32,731.00
22.		deposits you have made	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications	
	No Yes	Ins	stitution name or individual:	
23.	—		ment of money to you, either for life or for a number of years)	
		Issuer name and des	scription:	
24.	26 U.S.C. §§ 530(b)(1), §		a qualified ABLE program, or under a qualified state tuition program.	
	✓ No  Yes	Institution name and	description. Separately file the records of any interests. 11 U.S.C. § 521(c	)

	otor 1 otor 2	Arlene Y. Blair Errol E. Blair	Case number (if kno	own) <b>17-11900-cgm</b>
25.		, equitable or future interests in property (other the sexercisable for your benefit	nan anything listed in line 1), and rights or	
		s. Give specific ormation about them		
26.		s, copyrights, trademarks, trade secrets, and other les: Internet domain names, websites, proceeds from		
		s. Give specific ormation about them		
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative	e association holdings, liquor licenses, profe	essional licenses
		s. Give specific ormation about them		
Моі		roperty owed to you?		Current value of the portion you own? Do not deduct secure claims or exemptions
28.	Tax ref	funds owed to you		
		s. Give specific information		Federal:
		out them, including whether u already filed the returns		State:
	and	d the tax years		Local:
29.		support les: Past due or lump sum alimony, spousal support	, child support, maintenance, divorce settlem	nent, property settlement
	✓ No ☐ Yes	s. Give specific information	Alimon	ny:
			Mainte	nance:
			Suppor	rt:
			Divorce	e settlement:
			Proper	ty settlement:
30.		amounts someone owes you  les: Unpaid wages, disability insurance payments, d compensation, Social Security benefits; unpaid		kers'
	✓ No ☐ Yes	s. Give specific information		
31.		ts in insurance policies les: Health, disability, or life insurance; health saving	gs account (HSA); credit, homeowner's, or re	enter's insurance
	cor	s. Name the insurance npany of each policy d list its value Company name:	Beneficiary:	Surrender or refund valu
32.	If you a	terest in property that is due you from someone ware the beneficiary of a living trust, expect proceeds for to receive property because someone has died		
	✓ No ☐ Yes	s. Give specific information		

	otor 1 otor 2	Errol E. Blair	Case number (if known) _ <b>17</b> -	11900-cgm
33.		against third parties, whether or not you have filed es: Accidents, employment disputes, insurance claim		
	✓ No ☐ Yes	s. Describe each claim		
34.		ontingent and unliquidated claims of every nature o set off claims	, including counterclaims of the debtor and	
	_	s. Describe each claim		
35.		ancial assets you did not already list		
	✓ No ☐ Yes	s. Give specific information		
36.		e dollar value of all of your entries from Part 4, incl d for Part 4. Write that number here	_	\$545,606.84
P	art 5:	Describe Any Business-Related Property	You Own or Have an Interest In. List an	y real estate in Part 1.
37	Do you	own or have any legal or equitable interest in any	husiness-related property?	
• • •	-	Go to Part 6.	,	
		s. Go to line 38.		
				Current value of the portion you own?  Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commissions you already earned		·
	✓ No Yes	s. Describe		
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems,   desks, chairs, electronic devices	printers, copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes	s. Describe		
40.	Machin	ery, fixtures, equipment, supplies you use in busir	ness, and tools of your trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ry		
	✓ No ☐ Yes	s. Describe		
42.	Interes	ts in partnerships or joint ventures		
	✓ No ☐ Yes	s. Describe Name of entity:	% of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	<ul> <li>Do your lists include personally identifiable info</li> <li>No</li> <li>Yes. Describe</li> </ul>	ormation (as defined in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No	Give specific information		

	tor 1 tor 2	Arlene Y. Blair  Errol E. Blair  Case number (if known) 17-11	1900-cgm
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have	\$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have ar If you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
		Go to Part 7.  Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Examp	nimals les: Livestock, poultry, farm-raised fish	
	✓ No ☐ Yes	3	
<del>4</del> 8.	Crops-	either growing or harvested	
	_	s. Give specific	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	S	
50.	Farm a	nd fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	S	
51.	Any fai	m- and commercial fishing-related property you did not already list	
		s. Give specific	
52.		e dollar value of all of your entries from Part 6, including any entries for pages you have ed for Part 6. Write that number here	\$0.00
P	art 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	-	have other property of any kind you did not already list? les: Season tickets, country club membership	
	□ No		
		s. Give specific information.  IX refunds due for various years	Unknown
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here	\$0.00

62. Total personal property. Add lines 56 through 61.....

Errol E. Blair Case number (if known) 17-11900-cgm

### 

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Copy personal

property total

\$557,014.84

\$1,798,131.84

\$557,014.84

Debtor 1 Arlene Y. Blair Debtor 2 Errol E. Blair Case number (if known) 17-11900-cgm 11. Clothes (details):

Errol Blair's personal effects and clothing \$1,800.00 Arlene Blair's personal effects and clothing \$2,000.00

5 11 4						
Debtor 1	Arlene First Name	Y. Middle Nam	Blair e Last Name			
Debtor 2	Errol	E.	Blair			
Spouse, if filing)		Middle Nam		NEW.	VOBK	
		e. <u>3001nc</u>	RN DISTRICT OF	NEVV	TORK	Check if this is an amended filing
Case number if known)	<u>17-11900-cgm</u>					amended ming
fficial Form	<u>106C</u>					
chedule C:	The Propert	y You C	laim as Exem	pt		04/1
sing the property pace is needed, fil	you listed on Sched	<i>lule A/B: Prop</i> his page as n	perty (Official Form 10	06A/B)	as your source, list th	esponsible for supplying correct information e property that you claim as exempt. If more essary. On the top of any additional pages,
to state a specif cempted up to th ceive certain be cemption of 100%	fic dollar amount as le amount of any ap nefits, and tax-exer % of fair market val	s exempt. A oplicable sta mpt retireme ue under a la	Iternatively, you ma tutory limit. Some e int fundsmay be ur aw that limits the ex	y clair xemp ilimite empti	n the full fair market tionssuch as those d in dollar amount.  ŀ	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	ntify the Proper	ty You Cla	aim as Exempt			
Which out of						
Willeli Set of	exemptions are you	u claiming?	Check one only,	even	if your spouse is filing	with you.
You are o		ederal nonbar	nkruptcy exemptions.			with you.
You are o	claiming state and fe	ederal nonbar	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.		
You are of	claiming state and fe	ederal nonbar mptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U. mpt, f	S.C. § 522(b)(3)	
You are of	claiming state and fe claiming federal exer erty you list on Sch of the property and	ederal nonbar mptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2) nat you claim as exe Current value of the portion you	11 U. mpt, f American	S.C. § 522(b)(3)  ill in the information ount of the mption you claim	below.
You are of For any propertief description of Chedule A/B that trief description:	claiming state and fe claiming federal exer erty you list on <i>Sch</i> of the property and lists this property	ederal nonbar mptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)  nat you claim as exe  Current value of the portion you own  Copy the value from	11 U. mpt, f American	S.C. § 522(b)(3)  ill in the information ount of the mption you claim  eck only one box for the exemption  \$331,000.00	below.
You are of You are of You are of You are of For any propertief description of Chedule A/B that	claiming state and fe claiming federal exerence erty you list on School the property and lists this property	ederal nonbar mptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)  nat you claim as exe  Current value of the portion you own  Copy the value from Schedule A/B	11 U.  mpt, f  Ame exe	S.C. § 522(b)(3)  ill in the information ount of the mption you claim  eck only one box for the exemption	below. Specific laws that allow exemption
For any proper rief description: 325 E 233rd Street of the	claiming state and fe claiming federal exerence erty you list on School the property and lists this property	ederal nonbar mptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)  nat you claim as exe  Current value of the portion you own  Copy the value from Schedule A/B	11 U.  mpt, f  Ame exe  Che eac	S.C. § 522(b)(3)  ill in the information ount of the mption you claim  eck only one box for the exemption  \$331,000.00  100% of fair market value, up to any applicable statutory	below.  Specific laws that allow exemption  N.Y. CPLR § 5206(a)
For any proper rief description:  also be a considered and a considered an	claiming state and fe claiming federal exerence erty you list on <i>Sch</i> of the property and clists this property  reet  e A/B:	ederal nonbar mptions. 11 nedule A/B the line on	nkruptcy exemptions. U.S.C. § 522(b)(2)  nat you claim as exe  Current value of the portion you own  Copy the value from Schedule A/B  \$419,000.00	11 U.  mpt, f  Ameter exe	S.C. § 522(b)(3)  ill in the information ount of the mption you claim  eck only one box for the exemption  \$331,000.00  100% of fair market value, up to any applicable statutory limit	below. Specific laws that allow exemption

### Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$2.600.00 \$2,600.00 N.Y. CPLR § 5205(a) Miscellaneous household goods and 100% of fair market furnishing, including five beds, one dining value, up to any room table and chairs, one sofa, and three applicable statutory limit side chairs (1st exemption claimed for this asset) Line from Schedule A/B: 6 Brief description: \$2,600.00 \$0.00 N.Y. CPLR § 5205(a)(5) Miscellaneous household goods and 100% of fair market furnishing, including five beds, one dining value, up to any applicable statutory room table and chairs, one sofa, and three limit side chairs (2nd exemption claimed for this asset) Line from Schedule A/B: 6 Brief description: \$1,600.00 \$1,600.00 N.Y. CPLR § 5205(a) $\square$ Three televisions and one DVD player 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$1,600.00 \$0.00 N.Y. CPLR § 5205(a)(5) ablaThree televisions and one DVD player 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 7 limit \$1,800.00 Brief description: \$1,800.00 N.Y. CPLR § 5205(a) $\mathbf{V}$ Errol Blair's personal effects and clothing 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 11 limit Brief description: \$1,800.00 N.Y. CPLR § 5205(a)(5) $oldsymbol{ abla}$ \$0.00 Errol Blair's personal effects and clothing 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$2,000.00 N.Y. CPLR § 5205(a) \$2,000.00 $\square$ Arlene Blair's personal effects and 100% of fair market value, up to any applicable statutory (1st exemption claimed for this asset) limit Line from Schedule A/B: 11 Brief description: \$2,000.00 \$0.00 N.Y. CPLR § 5205(a)(5) ablaArlene Blair's personal effects and 100% of fair market clothing value, up to any applicable statutory (2nd exemption claimed for this asset)

Line from Schedule A/B: 11

Debtor 1	
Debtor 2	

Arlene Y. Blair Errol E. Blair

Case number (if known) 17-11900-cgm

### Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:  Prudential 401(k)  Line from Schedule A/B:	\$265,692.00	\$265,692.00 100% of fair market value, up to any applicable statutory limit	N.Y. CPLR § 5205(c); N.Y. Debtor & Creditor Law § 282(2)(e)
Brief description:  Jones Lang LaSalle 401(k)  Line from Schedule A/B:	\$114,633.84	\$114,633.84  100% of fair market value, up to any applicable statutory limit	N.Y. CPLR § 5205(c); N.Y. Debtor & Creditor Law § 282(2)(e)
Brief description: <b>Right to payments from pension plan</b> Line from <i>Schedule A/B</i> :	Unknown	100% of fair market value, up to any applicable statutory limit	N.Y. Debtor & Creditor Law § 282(2)
Brief description:  Prudential 457 plan  Line from Schedule A/B:21	\$32,731.00	\$32,731.00 100% of fair market value, up to any applicable statutory limit	N.Y. CPLR § 5205(c); N.Y. Debtor & Creditor Law § 282(2)(e)

Fill in this inf	ormation to identi	fv vour case:				
Debtor 1		Υ.	Blair			
		Middle Name	Last Name			
Debtor 2 (Spouse, if filing)		E. Middle Name	Blair Last Name			
United States Bar	nkruptcy Court for the:	SOUTHERN DIS	TRICT OF NEW YO	RK		
Case number	17-11900-cgm	SOOTHERN BIO	THIS TO THE WITE	- Transfer		
(if known)	17-11900-cgiii				Check if this is amended filing	
Official Form	106D				Ŭ	
	Creditors Who	Have Clain	ns Secured by	Property		12/15
correct informatio On the top of any	•	eded, copy the A e your name and o	dditional Page, fill it o case number (if know	out, number the entri	y responsible for suppes, and attach it to this	
☐ No. Che		this form to the cou	-	edules. You have noth	ing else to report on thi	s form.
Part 1: Lis	t All Secured Clai	ms				
claim, list the creditor has a	ed claims. If a creditor creditor separately for e particular claim, list the ible, list the claims in all e.	each claim. If more other creditors in I	than one Part 2. As	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the preserved the cla		\$341,927.76	\$456,292.00	
	Mtg Invest. Trust 2					
c/o Ocwen Loan	Servicing LLC	_				
Number Street 1661 Worthingto	on Road, Suite 100					
		As of the date y	you file, the claim is:	Check all that apply.		
West Palm Beac		_				
City	State ZIP Code	Disputed				
Who owes the deb	off Check one.		Check all that apply.	mortgage or secured	car loan)	
Debtor 2 only		_	ent you made (such as en (such as tax lien, me		cai loaii)	
Debtor 1 and D		Judament li	en from a lawsuit	,		
_ ~	the debtors and anothe	Other (inclu	ding a right to offset)			
to a communit						
Date debt was inc	urred	Last 4 digits of	account number	7 6 7 7		

\$341,927.76

Part 1:

### **Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

2.2	Describe the property that secures the claim: \$20	3,278.44	\$456,292.00
RLF Mortgage Corporation Creditor's name c/o BSI Financial Services	— 4023 Dereimer Avenue		
Number Street P.O. Box 679002	_		
Dallas TX 75267-9002 City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim relates to a community debt	Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit	or secured car loa	n)
Date debt was incurred	Last 4 digits of account number 8 8	4 7	
US Bank Home Mortgage Creditor's name 4801 Frederica Street Number Street	Describe the property that secures the claim: \$148  — 1325 E 233rd Street	3,985.04	\$419,000.00
US Bank Home Mortgage Creditor's name 4801 Frederica Street	secures the claim:  — 1325 E 233rd Street  — As of the date you file, the claim is: Check all to contingent — Unliquidated — Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage) — Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit	hat apply. or secured car loa	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$177,263.48

Debtor 1	Arlene Y. Blair
Debtor 2	Errol E. Blair

Part 1:

**Additional Page** 

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

		value of collateral	claim	if any
Wells Fargo Home Mortgage Creditor's name P.O. Box 11701 Number Street	Describe the property that secures the claim: 1337 E 233rd Street	\$29,497.62	\$362,000.00	
Newark NJ 07101-4701 City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	As of the date you file, the claim is:  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as Statutory lien (such as tax lien, many Judgment lien from a lawsuit Other (including a right to offset)	s mortgage or secured	car loan)	
Date debt was incurred	Last 4 digits of account number	5 0 8 2		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$29,497.62

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$548,688.86

Debtor 1	Arlene Y. Blair
Debtor 2	Errol E. Blair

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

1	Clarfield Okon & Salomone PL Name 114 Old Country Road Number Street			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	2.1
	Mineola City	NY State	<b>11501</b> ZIP Code	_ _	
2	Ocwen Name P.O. Box 24738 Number Street			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	2.1
	West Palm Beach City	FL State	<b>33416-4738</b> ZIP Code	_ _	
3	Ocwen Loan Servicing LLC  Name P.O. Box 660264  Number Street			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number	2.1
	Dallas City	TX State	<b>75266-0264</b> ZIP Code	<u>-</u> -	

Fill in this inf	ormation to ic	dentify your	case:			
Debtor 1	Arlene	Y.	Blair			
	First Name	Middle Name	e Last Name			
Debtor 2	Errol	E.	Blair			
(Spouse, if filing)	First Name	Middle Name	e Last Name			
United States Bar	nkruptcy Court for	the: <b>SOUTHE</b>	RN DISTRICT OF NEW YORK			
Case number (if known)	17-11900-cgm	<u> </u>		Г	Check if this is a	an
(II KIIOWII)					amended filing	
Official Form	106F/F					
-		- \A/b -	Uma a a coma d'Olaima a			40/45
Schedule E/	F: Creditors	s wno Hav	e Unsecured Claims			12/15
Do not include an If more space is n to this page. On t	y creditors with placeded, copy the the top of any add	partially secure Part you need, ditional pages,	and on Schedule G: Executory Cond claims that are listed in Schedule fill it out, number the entries in the kwrite your name and case number (insecured Claims	D: Creditors Who Hooxes on the left. At	old Claims Secur	ed by Property.
_		unsecurea cia	ims against you?			
□ No. Go t ✓ Yes.	io Pari 2.					
claim. For ear show both prio more space is claim, list the	ch claim listed, ide ority and nonpriori s needed for priorit other creditors in	entify what type of ty amounts. As ty unsecured cla Part 3.	a creditor has more than one priority ur of claim it is. If a claim has both priorit much as possible, list the claims in alp ims, fill out the Continuation Page of P	ty and nonpriority amo phabetical order acco Part 1. If more than o	ounts, list that clain rding to the credito	m here and or's name. If
(i oi un explai	nation of caon type	o or olaim, see a		Total claim	Priority	Nonpriority
					amount	amount
2.1				Unknown	Unknown	Unknown
Department of T			- Last 4 digits of account number			
Priority Creditor's Nam Internal Revenu Number Street			When was the debt incurred?		_	
			As of the date you file, the claim i	s: Check all that app	ly.	
			Contingent	s: Check all that app	ly.	
Kansas City		<b>64999-0002</b> ZIP Code		s: Check all that app	ly.	

Debtor 1 Debtor 2	Arlene Y. Blair Errol E. Blair Case		se number (if known	) <u>17-11900-cg</u>	m
Part 1:	Your PRIORITY Unsecured C	Claims Continuation Page			
After listin previous p	g any entries on this page, number the page.	m sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2			\$1,210.00	\$1,210.00	\$0.00
Law Office of Ethan Ganc Priority Creditor's Name  99 Madison Avenue Number Street Suite 5009		Last 4 digits of account number			
		When was the debt incurred? 07/09/2017			
Ounc ooo		<ul> <li>As of the date you file, the claim is</li> <li>Contingent</li> </ul>	: Check all that app	lly.	
New York	NY 10016 State ZIP Code	Unliquidated Disputed			
Who incur	red the debt? Check one.	Type of PRIORITY unsecured clain	n:		
At leas	2 only 1 and Debtor 2 only t one of the debtors and another	Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			
_	if this claim is for a community debt	Other. Specify			
Is the clair	n subject to offset?	Attorney fees for this case			

Official Form 106E/F

✓ No Yes

Debtor 1 Debtor 2	Arlene Y. Blair Errol E. Blair	Case number (if known) 17-11900-cgm
Part 2:	List All of Your NONPRIORITY	/ Unsecured Claims
No Ye  4. List all If a crec type of a	of your nonpriority unsecured claims i ditor has more than one nonpriority unsec claim it is. Do not list claims already inclu	Claims against you?  Submit this form to the court with your other schedules.  In the alphabetical order of the creditor who holds each claim.  Bured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
Louisville  City  Who incurre  ☑ Debtor 1  ☐ Debtor 2  ☐ Debtor 1  ☐ At least 0  ☐ Check if	KY   40290-1037	Last 4 digits of account number 8 2 9 6  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card
Atlanta City Who incurre Debtor 1 At least 0 Check if	### Street    GA 30353   State ZIP Code   Check one.   Only	Unknown  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Mobile phone services

After listing any entries on this page, number them sequentially from the previous page.  4.3 Unknown  Bank of America Nonpriority Creditor's Name P.O. Box 15019 Number Street  When was the debt incurred? As of the date you file, the claim is: Check all that apply.  Chock if this claim is for a community debt is the claim subject to offset?  Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim subject to offset?  Who incurred the debt?  Check if this claim is for a community debt is the claim subject to offset?  As of the date you file, the claim subject to offset?  Check if this claim is for a community debt is the claim subject to offset?  As of the date you file the claim is community debt is the claim subject to offset?  When was the debt incurred?  Capital One  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unknown  Unknown  Capital One  Nonpronity Creditor's Name P.O. Box 71087  Number Street  As of the date you file, the claim is: Check all that apply.  Contingent  Contingent	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Bank of America  Nonpriority Creditor's Name P.O. Box 15019  Number Street  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.4  Capital One  Nonpriority Creditor's Name P.O. Box 71087  Number Street  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Unknown  Unknown  As of the date you file, the claim is: Check all that apply.  Contingent		m sequentially from the	Total claim
Nonpriority Creditor's Name   When was the debt incurred?	4.3		Unknown
P.O. Box 15019 Number Street    Contingent   Unliquidated   Disputed		Last 4 digits of account number 3 2 8 5	
As of the date you file, the claim is: Check all that apply.    Contingent		When was the debt incurred?	
Wilmington DE 19886-5019 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?    Ves		As of the date you file, the claim is: Check all that apply.	
Wilmington DE 19886-5019  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor this claim is for a community debt Is the claim subject to offset?  No Yes  At 4.4  Capital One Nonpriority Creditor's Name P.O. Box 71087  Number Street  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Credit Card  Unknown  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent			
Wilmington DE 19886-5019 City State ZIP Code Who incurred the debt? Check one. Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.4  Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Credit Card  Unknown  Last 4 digits of account number 2 2 9 3 When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent		<b>—</b> — ·	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.4  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  Number Street  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Unknown  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent		_ <b>_</b> _ ·	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Last 4 digits of account number P.O. Box 71087  Number Street  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Unknown  Last 4 digits of account number 2 2 9 3  When was the debt incurred? As of the date you file, the claim is: Check all that apply.  Contingent		••	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.4  Last 4 digits of account number 2 2 9 3  Nonpriority Creditor's Name P.O. Box 71087  Number Street  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent	- Diliting A control		
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.4  Capital One Nonpriority Creditor's Name P.O. Box 71087  Number Street  Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card  Unknown  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent			
Check if this claim is for a community debt Is the claim subject to offset?  No Yes  4.4  Capital One Nonpriority Creditor's Name P.O. Box 71087  Number Street  Check if this claim is for a community debt Credit Card  Unknown  Unknown  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent			
Is the claim subject to offset?  No Yes  4.4  Capital One Nonpriority Creditor's Name P.O. Box 71087  Number Street  Last 4 digits of account number 2 2 9 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent			
Ves  4.4  Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Last 4 digits of account number 2 2 9 3 When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent	<b>-</b>	Credit Card	
Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Last 4 digits of account number 2 2 9 3 When was the debt incurred? As of the date you file, the claim is: Check all that apply.  Contingent			
Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Contingent  Contingent			
Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Capital One Nonpriority Creditor's Name P.O. Box 71087 Number Street  Contingent  Contingent			
Nonpriority Creditor's Name P.O. Box 71087  Number Street  Contingent  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.	4.4		Unknown
P.O. Box 71087  Number Street  As of the date you file, the claim is: Check all that apply.  Contingent	Capital One	Last 4 digits of account number2	
Number Street As of the date you file, the claim is: Check all that apply.  Contingent		When was the debt incurred?	
= i i i i i i i i i i i i i i i i i		— As of the date you file, the claim is: Check all that apply.	
		<b>=</b>	
Disputed			
Charlotte NC 28272-1087			
City State ZIP Code Type of NONPRIORITY unsecured claim:  Who incurred the debt? Check one.	•	Type of NONPRIORITY unsecured claim:	
Debter 1 only	<b>— B</b> 11 4 1		
Debtor 2 only  Debtor 2 only  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	·		
Debtor 1 and Debtor 2 only			
At least one of the debtors and another    Other. Specify	<b>-</b>	☑ Other Specify	
Check if this claim is for a community debt Credit Card	Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?			
☑ No ☐ Yes	Yes		
\$282.05	4.5		\$282.05
ConEdison Last 4 digits of account number 0 0 1 3	ConEdison	Last 4 digits of account number 0 0 1 3	
Nonpriority Creditor's Name  Cooper Station  When was the debt incurred?		When was the debt incurred?	
Cooper Station  Number Street  As of the date you file, the claim is: Check all that apply.		As of the date you file, the claim is: Check all that apply.	
P.O. Box 138 Contingent	P.O. Box 138	Contingent	
Unliquidated			
New York NY 10276-0137 Disputed	New York NY 10276-0137	Disputed	
City State ZIP Code Type of NONPRIORITY unsecured claim:		Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Student loans  Obligations pricing out of a congretion agreement or diverse.			
Debtor 2 only			
that you did not report as priority claims  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  Debts to pension or profit-sharing plans, and other similar debts	· ·		
At least one of the debtors and another  Other. Specify	At least one of the debtors and another		
Check if this claim is for a community debt  Utility	☐ Check if this claim is for a community debt		
Is the claim subject to offset?			
☑ No ☐ Yes			
1337 E 233rd St			

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$0.00
ConEdison	Last 4 digits of account number 0 0 3 4	<del></del>
Nonpriority Creditor's Name	Last 4 digits of account number 0 0 3 4  When was the debt incurred?	
Cooper Station Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 138	Contingent	
	Unliquidated	
New York NY 10276-0137	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Utility  Other. Specify  Utility	
Is the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·	
<b>☑</b> No		
Yes		
4.7		
	Look A divide of consumations have	\$0.00
ConEdison Nonpriority Creditor's Name	Last 4 digits of account number	
Cooper Station	When was the debt incurred?	
Number Street P.O. Box 138	As of the date you file, the claim is: Check all that apply.	
1.0. Box 100	□ Contingent     □ Unliquidated	
	Disputed	
New York         NY         10276-0137           City         State         ZIP Code	Type of NONDRIORITY uncesswed eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Utility	
No		
Yes		
4.8		\$9,074.34
Discover Credit Card	_ Last 4 digits of account number 6 2 1 3	
Nonpriority Creditor's Name P.O. Box 71084	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Charlotte NC 28272-1084	— —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations crising out of a congretion agreement or diverse	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Credit card purchases	
Is the claim subject to offset?		
☑ No □ Yes		
<b>□</b>		

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.9		Unknown
U Promise Card Services	Last 4 digits of account number 9 8 0 4	
Nonpriority Creditor's Name P.O. Box 13337	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Philadelphia PA 19101-3337  City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
Is the claim subject to offset?	Credit Card	
✓ No		
Yes		
4.10		Union
U.S. Bank	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 790408 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Saint Louis MO 63179-0408	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		
4.11		Unknown
Verizon	Last 4 digits of account number 0 1 0 3	
Nonpriority Creditor's Name P.O. Box 15124	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Albany NY 12212-5124		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans  Obligations arising out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Phone	
Is the claim subject to offset?  ✓ No		
Yes		

Debtor 1 Debtor 2	Arlene Y. Blair Errol E. Blair	Case number (if known)	17-11900-cgm

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for

List Others to Be Notified About a Debt That You Already Listed

any debts in Parts 1 or 2, do not fill out or submit this page.

ZIP Code

Internal Revenue Service			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name P.O. Box 7346 Number Street			Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		
Philadelphia City	PA State	<b>19101-7346</b> ZIP Code	Last 4 digits of account number 7 9 2 2		
NYC Dept of Finance			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name 66 John St, 3rd Floor Number Street	r		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Taxes Part 2: Creditors with Nonpriority Unsecured Claims		
New York         NY         10038-3735           City         State         ZIP Code			Last 4 digits of account number		
NYS Dept of Taxatio	n & Financ	e	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name Bankruptcy Section Number Street P.O. Box 5300			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Taxes Part 2: Creditors with Nonpriority Unsecured Claims		
Albany City	NY State	<b>12205-0300</b> ZIP Code	Last 4 digits of account number		
US Attorney, SDNY			On which entry in Part 1 or Part 2 did you list the original creditor?		
Name 86 Chambers St Number Street			Lineof (Check one):  Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims		
New York	NY	10007	— Last 4 digits of account number		

City

Part 3:

Debtor 1	Arlene Y. Blair
Debtor 2	Frrol F. Blair

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <b>\$0.00</b>
	6b.	Taxes and certain other debts you owe the government	6b. <b>\$0.00</b>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <b>\$0.00</b>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>+</b> \$1,210.00
	6e.	Total. Add lines 6a through 6d.	6d. <b>\$1,210.00</b>
			Total claim
			i otai ciaim
Total claims from Part 2	6f.	Student loans	6f. <b>\$0.00</b>
		Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	6g.	Obligations arising out of a separation agreement or divorce	6f. <b>\$0.00</b>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	6f. \$0.00 6g. \$0.00 6h. \$0.00

Fill in this in	formation to i	dentify your case	:	
Debtor 1	Arlene	Υ.	Blair	
	First Name	Middle Name	Last Name	
Debtor 2	Errol	E.	Blair	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ınkruptcy Court fc	or the: <b>SOUTHERN D</b>	ISTRICT OF NEW YORK	
Case number	17-11900-cgn	n		☐ Check if the

Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

Do you have any executory contracts or unexpired leases?

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

[ [			,	chedules. You have nothing else to report on this form.  Is are listed on Schedule A/B: Property (Official Form 106A/B).
is		ell phone).	•	tract or lease. Then state what each contract or lease s for this form in the instruction booklet for more examples of
	Person or company with whom you l	have the co	ntract or lease	State what the contract or lease is for
2.1	Dwight and Norma Thomas			One year lease for residential real property with
	Name 4023 Dereimer Avenue - 2nd Fl.			debtors as lessors; monthly rent \$1,550; expires
	Number Street			<ul> <li>April 2018</li> <li>Contract to be ASSUMED</li> </ul>
	Bronx Citv	NY State	<b>10466</b> ZIP Code	_
2.2	Marie Miller Name	State	ZIF Code	_ Lease for residential real property with debtors as
	1337 E 233rd St Number Street			lessors; monthly rent \$1,825; expires July 2018  Contract to be ASSUMED
	Bronx	NY	10466	
	City	State	ZIP Code	
2.3	Wayne and Maxine Davis Name			_ Residential real property lease with debtors as
	4023 Dereimer Avenue - 1st Fl Number Street			lessors; monthly rent of \$1,100; expires March 2018  Contract to be ASSUMED
	Bronx City	NY State	<b>10466</b> ZIP Code	_ _

Fill in this info	ormation to ic				
Debtor 1	Arlene First Name	Y. Middle Name	Blair Last Name	_	
Debtor 2 (Spouse, if filing)	Errol	E.  Middle Name	Blair Last Name	_	
United States Bar	nkruptcy Court for	the: <b>SOUTHERN D</b>	ISTRICT OF NEW YORK	_	
Case number (if known)	<u>17-11900-cgm</u>				Check if this is a amended filing

## Official Form 106H

### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  ☑ No ☐ Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Yes
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use <i>Schedule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

	ill in this inform	action to ide	ntify your occo					
			ntify your case:					
	Debtor 1	Arlene First Name	Y. Middle Name		Blair Last Name		 	eck if this is:
	Debtor 2	Errol	E.		Blair			An amended filing
	(Spouse, if filing)	First Name	Middle Name		Last Name		_ _	· ·
	United States Bankı	ruptcy Court for	the: <b>SOUTHERN</b>	DISTR	ICT OF NE	W YORK		A supplement showing postpetition chapter 13 income as of the following date:
	Case number (if known)	<u>17-11900-cç</u>	<u>jm</u>			_		MM / DD / YYYY
Of	ficial Form 10	) <u>61</u>						IVIIVI / DD / TTTT
	chedule I: Yo							12/15
inc abo you	lude information al out your spouse. If ur name and case r	bout your spou f more space is	se. If you are separ needed, attach a se n). Answer every q	ated an parate	d your spou sheet to this	ıse is not f	iling with y	spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your emplo	oyment						D. I
	If you have more t	han one		Debto	or 1			Debtor 2 or non-filing spouse
	job, attach a sepa with information al	bout	nployment status	_	Employed Not employe	d		<ul><li>Employed</li><li>Not employed</li></ul>
	additional employe	ers. O	ccupation	Assi	stant Gene	ral Mana	ger	Supervisor
	Include part-time, or self-employed v		mployer's name	Mills	tein Broth	ers Real E	state LLC	NYC Transit Authority
	Occupation may in student or homem applies.		mployer's address		nover Squarer Street	are		Number Street
				New City	York	NY State	<b>10004</b> Zip Code	City State Zip Code
		He	ow long employed th	nere?	13 years	<b>)</b>	_	15 years
Р	art 2: Give D	Details About	t Monthly Incom	е				
Est		ome as of the d	ate you file this forn		u have nothii	ng to report	for any line	, write \$0 in the space. Include your
If y	ou or your non-filing	spouse have m		er, comb	bine the info	mation for	all employe	rs for that person on the lines below. If
						For D	ebtor 1	For Debtor 2 or non-filing spouse
2.			y, and commissions onthly, calculate what			2	\$7,493.01	\$9,482.59

Official Form 106I Schedule I: Your Income page 1

\$0.00

\$7,493.01

\$1,896.53

\$11,379.12

Estimate and list monthly overtime pay.

Calculate gross income. Add line 2 + line 3.

Debtor 1 Arlene Y. Blair
Debtor 2 Errol E. Blair

Case number (if known) 17-11900-cgm For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here ..... \$7,493.01 \$11,379.12 List all payroll deductions: \$2,456.92 \$2,337.08 5a. Tax, Medicare, and Social Security deductions 5a. 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$210.02 \$0.00 \$2,100.13 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 \$113.79 5f. Domestic support obligations 5f. \$0.00 \$0.00 \$210.02 \$0.00 5g. Union dues 5g. 5h. Other deductions. Specify: Transit pre-tax / See continuation sheet 5h.+ \$131.08 \$55.25 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + \$2.588.00 \$5,026.29 Calculate total monthly take-home pay. Subtract line 6 from line 4. \$4,905.01 \$6,352.83 List all other income regularly received: 8a. Net income from rental property and from operating a 8a (\$335.00) \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8с \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. 8e. Social Security \$0.00 \$0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. (\$335.00)\$0.00 10. Calculate monthly income. Add line 7 + line 9. \$10,922.84 \$4,570.01 \$6,352.83 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$10,922.84 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? **V** No. None. Yes. Explain:

Debtor 1 Arlene Y. Blair
Debtor 2 Errol E. Blair Case number (if known) 17-11900-cgm

5h. Other Payroll Deductions (details)
Transit pre-tax / NYCT SSSA
Subway Service SUPV

Totals: \$131.08

For Debtor 1
For Debtor 2 or
non-filing spouse
\$53.08
\$2.17

F	ill in this inforn	nation to ide	entify your case:			Ob a ale if	i Aleie ie.	
	Debtor 1	Arlene First Name	Y. Middle Name	Blair Last N		<b>-</b>	amended filing upplement showing	postpetition
	Debtor 2 (Spouse, if filing)	<b>Errol</b> First Name	E. Middle Name	Blair Last N		cha	apter 13 expenses a owing date:	
	United States Bank	ruptcy Court for	the: <b>SOUTHERN</b>	DISTRICT O	F NEW YORK	MM	1 / DD / YYYY	
	Case number (if known)	<u>17-11900-c</u>	gm					
01	fficial Form 10	) <u>6J</u>				•		
Sc	chedule J: Yo	our Expen	ises					12/15
cor	rrect information. I	f more space i	s needed, attach an Answer every ques	other sheet to	ling together, both ar this form. On the top			
1.	Is this a joint cas		usenoiu					
2.	No Ye	Debtor 2 live in s. Debtor 2 mu endents?	<ul><li>No</li><li>✓ Yes. Fill out thi</li></ul>	06J-2, Expenses	es for Separate Housel  Dependent's relation	onship to	Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and	for each depend		_	2	age	live with you?
	Do not state the d	ependents'			<u>Son</u>		<u> </u>	Yes
	names.	<b>5</b> po <b>3</b> o <b>5</b>			Son		14	□ No - ☑ Yes
					Daughter		13	□ No - ☑ Yes
					Daughter		7	No No Yes No
3.	Do your expense expenses of peo yourself and you	ole other than	☑ No □ Yes					Yes Yes
P	art 2: Estima	ate Your On	going Monthly E	xpenses				
to ı	•	of a date after	r the bankruptcy is f	-	are using this form as a supplemental Sche		-	
	•		cash government as it on Schedule I: Yo	-			Your expens	ses
4.		-	expenses for your read and any rent for the g				4.	\$1,850.00
	If not included in	line 4:						
	4a. Real estate t	axes					4a	
	4b. Property, hor	neowner's, or re	enter's insurance				4b	
	4c. Home mainte	enance, repair, a	and upkeep expense	s			4c	\$1,000.00
	4d. Homeowner's	s association or	condominium dues				4d.	

Debtor 1	Arlene Y. Blair
Debtor 2	Frrol F Blair

Your expenses

5.	Additional mortgage payments for your residence, such as home equity loans	5						
6.	Jtilities:							
	6a. Electricity, heat, natural gas	6a.	\$800.00					
	6b. Water, sewer, garbage collection	6b.	\$600.00					
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$550.00					
	6d. Other. Specify:	6d						
7.	Food and housekeeping supplies	7.	\$1,200.00					
8.	Childcare and children's education costs	8.	\$300.00					
9.	Clothing, laundry, and dry cleaning	9.	\$375.00					
10.	Personal care products and services	10.	\$250.00					
11.	Medical and dental expenses	11.	\$150.00					
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$550.00					
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00					
14.		14.	\$200.00					
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.							
	15a. Life insurance	15a.	\$310.00					
	15b. Health insurance	15b.						
	15c. Vehicle insurance	15c.	\$158.33					
	15d. Other insurance. Specify:	15d.						
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.						
17.	Installment or lease payments:							
	17a. Car payments for Vehicle 1	17a.						
	17b. Car payments for Vehicle 2	17b.						
	17c. Other. Specify:	17c						
	17d. Other. Specify:	17d						
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.						
19.	Other payments you make to support others who do not live with you.  Specify:	19.						
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.							
	20a. Mortgages on other property	20a						
	20b. Real estate taxes	20b						
	20c. Property, homeowner's, or renter's insurance	20c.						
	20d. Maintenance, repair, and upkeep expenses	20d.						
	20e. Homeowner's association or condominium dues	20e.						

Debtor 1 Debtor 2		Arlene Y. Blair			
Deb	tor 2	Errol E. Blair	Case number (if known)	<u>17-11900-cgm</u>	
21.	Other.	Specify:	21. +_		
22.	Calcul	ate your monthly expenses.			
	22a. <i>i</i>	Add lines 4 through 21.	22a	\$8,393.33	
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	_	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$8,393.33	
23.	Calcul	ate your monthly net income.			
	23a. (	Copy line 12 (your combined monthly income) from Schedule I.	23a. <u> </u>	\$10,922.84	
	23b. (	Copy your monthly expenses from line 22c above.	23b. <b>_</b> _	\$8,393.33	
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$2,529.51	
24.	Do you	expect an increase or decrease in your expenses within the year after you fi	le this form?		
		ample, do you expect to finish paying for your car loan within the year or do you ex nt to increase or decrease because of a modification to the terms of your mortgage	, ,		
	▼ No	es. Explain here: None.			

Fill in this information to identify your case:						
Debtor 1	Arlene	Υ.	Blair			
	First Name	Middle Name	Last Name			
Debtor 2	Errol	E.	Blair			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	SOUTHERN DIST	RICT OF NEW YORK			
Case number (if known)	17-11900-cgm					
(II KIIOWII)						

Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

# Part 1: Summarize Your Assets Your assets Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

### Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)
 Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D....

\$548,688.80

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F......+ \$9,356.39

\_\_\_

Your total liabilities

\$559,255.25

### Part 3: Summarize Your Income and Expenses

De	btor 2	Errol E. Blair	Case number (if known) 17-11900-cgm				
ŀ	Part 4:	Answer These Questions for Administrative and Statistic	cal Records				
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?					
	ш.	lo. You have nothing to report on this part of the form. Check this box and su	abmit this form to the court with your other schedules.				
7.	What	What kind of debt do you have?					
		our debts are primarily consumer debts. Consumer debts are those "incuramily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis					
		<b>Your debts are not primarily consumer debts.</b> You have nothing to report on this form to the court with your other schedules.	n this part of the form. Check this box and submit				
8.		From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.					
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:						
			Total claim				
	From	Part 4 on Schedule E/F, copy the following:					
	9a. D	omestic support obligations. (Copy line 6a.)					
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)					
	9c. C	claims for death or personal injury while you were intoxicated. (Copy line 6c.)					
	9d. S	tudent loans. (Copy line 6f.)					
		Obligations arising out of a separation agreement or divorce that you did not re riority claims. (Copy line 6g.)	port as				
	9f. D	bebts to pension or profit-sharing plans, and other similar debts. (Copy line 6h	<b>+</b>				

Debtor 1

Arlene Y. Blair

9g. **Total.** Add lines 9a through 9f.

Fill in this info	ormation to iden						
Debtor 1	Arlene First Name	Y. Middle Name	<b>Blair</b> Last Name	_			
Debtor 2 (Spouse, if filing)	Errol First Name	E. Middle Name	Blair Last Name	_			
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK							
Case number (if known)	<u>17-11900-cgm</u>				Check if this is an amended filing		

# Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below								
Did you pay or agree to pay someone who	o is NOT an attorney to help you fill out bankruptcy forms?							
<b>☑</b> No								
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).							
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X /s/ Arlene Y. Blair Arlene Y. Blair, Debtor 1	X /s/ Errol E. Blair Errol E. Blair, Debtor 2							
Date <u>08/24/2017</u> MM / DD / YYYY	Date <u>08/24/2017</u> MM / DD / YYYY							

F	Fill in this information to identify your case:							
D	ebtor 1	Arlene	Υ.	Blair				
		First Name	Middle Name	Last Name				
	ebtor 2 Spouse, if filing)	Errol First Name	E. Middle Name	Blair Last Name				
U	nited States Bar	nkruptcy Court for the	: SOUTHERN DI	STRICT OF NI	EW YORK			
С	ase number	17-11900-cgm				☐ Check if this	e ie an	
(i1	known)					amended fil		
<u>Of</u>	<u>ficial Form</u>	107						
St	atement o	f Financial Af	fairs for Ind	ividuals Fi	ling for Bankr	uptcy	04/16	
you	rect informatio ur name and ca	n. If more space is se number (if known	needed, attach a s n). Answer every	separate sheet t question.		e equally responsible for stop of any additional pages		
		ourrent marital atatu	10.2					
1.	Married  Not marrie	current marital statu	18 ?					
2.	<b>☑</b> No	st 3 years, have you	-		you live now?  ude where you live no	NW.		
3.	_					ow. nity property state or territo	arv?	
٥.	(Community p		-			vada, New Mexico, Puerto Ri	-	
	✓ No ☐ Yes. Mak	e sure you fill out <i>Sci</i>	hedule H: Your Cod	debtors (Official I	Form 106H).			
Р	art 2: Exp	olain the Source	s of Your Incor	ne				
4.	Fill in the total	amount of income yo	ou received from all	jobs and all bus	isiness during this y inesses, including pa other, list it only once		endar years?	
	□ No ☑ Yes. Fill i	n the details.						
			Debtor 1			Debtor 2		
			Sources of Check all t		Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions	
	-	f the current year un for bankruptcy:		s, commissions, es, tips	\$48,397.11	Wages, commissions, bonuses, tips	\$68,272.52	
			☐ Opera	ting a business		Operating a business		
	the last calend	•		s, commissions, es, tips	\$88,771.61	Wages, commissions, bonuses, tips	\$101,138.02	
(Ja	nuary 1 to Dece	mber 31, <u><b>2016</b></u> )	_	ting a business		Operating a business		
	-	ear before that:		s, commissions, es, tips		Wages, commissions, bonuses, tips	\$96,235.54	
(Ja	nuary 1 to Dece	mber 31, <u>2015</u> ) YYYY		ting a business		Operating a business		

Debtor 1 Debtor 2		Arlene Y. Blair Errol E. Blair	Case number (if known) _ <b>17-11900-cgm</b>				
5. Did you receive any other income during this year or the two previous calendar years?  Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.							
	List each source and the gross income from each source separately. Do not include income that you listed in line 4.						
	✓ No ☐ Yes.	Fill in the details.					
P	art 3:	List Certain Payments You Made Before You Fi	ed for Bankruptcy				
6.	Are eith	er Debtor 1's or Debtor 2's debts primarily consumer debts?					
	<b>☑</b> No.	Neither Debtor 1 nor Debtor 2 has primarily consumer del "incurred by an individual primarily for a personal, family, or h					
	ay any creditor a total of \$6,425* or more?						
No. Go to line 7.							
		Yes. List below each creditor to whom you paid a total of total amount you paid that creditor. Do not include possible child support and alimony. Also, do not include pay	payments for domestic support obligations, such as				
		* Subject to adjustment on 4/01/19 and every 3 years after th	at for cases filed on or after the date of adjustment.				
	☐ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer del	ots.				
		During the 90 days before you filed for bankruptcy, did you pa	y any creditor a total of \$600 or more?				
		No. Go to line 7.					
		Yes. List below each creditor to whom you paid a total of creditor. Do not include payments for domestic sup Also, do not include payments to an attorney for this	port obligations, such as child support and alimony.				
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation such as child support and alimony.							
	✓ No ☐ Yes.	List all payments to an insider.					

	tor 1 tor 2	Arlene Y. Blair Errol E. Blair		Case number (if	known) <b>17-119</b>	900-cgm	
8.		1 year before you filed fored an insider?	r bankruptcy, did you make any paymen	ts or transfer any prop	erty on account	of a debt t	that
	Include	payments on debts guara	nteed or cosigned by an insider.				
	▼ No □ Yes	s. List all payments that be	enefited an insider.				
P	art 4:	Identify Legal Acti	ons, Repossessions, and Foreclo	sures			
9.	List all	•	or bankruptcy, were you a party in any law rsonal injury cases, small claims actions, di es.		•	_	
	□ No ✓ Yes	s. Fill in the details.					
Cas	e title		Nature of the case	Court or agency		Status	of the case
		Bank Nat'l Trust Co. ol Blair, Arlene Blair,	Foreclosure action against property located at 4023 Dereimer	Bronx County Sup Court Name	reme Court	F	Pending
et a	_	inoi bian, Anene bian,	Avenue, Bronx, NY 10466				☐ On appeal
Cas	e numbe	er 380343/14		Number Street		- -	<b>-</b> ☐ Concluded
		00040/14				ـ	_
				City	State ZIP Co	ode	
10.	seized	1 year before you filed for or levied? all that apply and fill in the	or bankruptcy, was any of your property of details below.	epossessed, foreclos	ed, garnished, at	tached,	
	سنا	. Go to line 11. s. Fill in the information be	elow.				
11.			for bankruptcy, did any creditor, includir refuse to make a payment because you	~	nstitution, set of	f any	
	✓ No ☐ Yes	s. Fill in the details.					
12.		•	or bankruptcy, was any of your property i eiver, a custodian, or another official?	n the possession of a	n assignee for th	e benefit o	of
	✓ No ☐ Yes						

		Arlene Y. E Errol E. Bl			Ca	Case number (if known)				
Р	art 5:	List Cer	ain G	ifts and Co	ntributions					
13.	Within	2 years befo	re you f	filed for bankı	ruptcy, did you give any gifts with a total	value of more that	an \$600 per perso	on?		
	✓ No ☐ Yes	s. Fill in the d	etails fo	or each gift.						
14.		2 years befo charity?	re you f	filed for bankr	ruptcy, did you give any gifts or contribut	tions with a total	value of more tha	ın \$600		
	✓ No ☐ Yes	s. Fill in the d	etails fo	or each gift or o	contribution.					
Р	art 6:	List Cer	ain Lo	osses						
15.		1 year before isaster, or g	•		ptcy or since you filed for bankruptcy, d	id you lose anyth	ing because of th	neft, fire,		
	✓ No ☐ Yes	s. Fill in the d	etails.							
Р	art 7:	List Cer	ain Pa	ayments or	Transfers					
16.		-	•		iptcy, did you or anyone else acting on y nkruptcy or preparing a bankruptcy petit		transfer any pro	perty to		
	Include	any attorneys	s, bankr	ruptcy petition	preparers, or credit counseling agencies for	r services required	l for your bankrupt	су.		
	□ No ☑ Yes	s. Fill in the d	etails.							
	nan D. G	anc, Esq.			Description and value of any property Attorney's fee and chapter 13 filing	g fee	Date payment or transfer was made	Amount of payment		
	w Office	of Ethan G	anc		_		7/6/17	\$100.00		
		n Avenue, S	Suite 5	009	_		7/10/17	\$3,500.00		
Ne City	w York		NY State	<b>10016</b> ZIP Code	_					
•		angancleg								
Ema	ail or websit	te address	<u> </u>		_					
Pers	son Who M	lade the Payme	nt, if Not	You	_					
17.					uptcy, did you or anyone else acting on your with your creditors or to make payments			perty to		
	-				t you listed on line 16.	<b>,</b>				
	✓ No	s Fill in the d	etails							

Deb Deb	
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
	include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.
	☑ No ☐ Yes. Fill in the details.
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)
	✓ No  Yes. Fill in the details.
P	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage nouses, pension funds, cooperatives, associations, and other financial institutions.
	☑ No □ Yes. Fill in the details.
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?
	☑ No □ Yes. Fill in the details.
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☑️ No
	Yes. Fill in the details.
P	rt 9: Identify Property You Hold or Control for Someone Else
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.
	☑ No □ Yes. Fill in the details.

Debtor 1 Debtor 2		Arlene Y. Blair Errol E. Blair		Case number (if known) <u>17-11900-cgm</u>				
P	art 1	0: Give Details About Env	Give Details About Environmental Information					
For	the p	ourpose of Part 10, the following o	lefinitions apply:					
■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releat hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medius including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
		rdous material means anything a ance, hazardous material, polluta	n environmental law defines as a hazardou nt, contaminant, or similar item.	us waste, hazardous substance, toxic				
Rep	ort a	Il notices, releases, and proceedi	ngs that you know about, regardless of wh	nen they occurred.				
24.	Has law		ou that you may be liable or potentially lial	ble under or in violation of an environmental				
		No Yes. Fill in the details.						
25.	Hav	e you notified any governmental (	unit of any release of hazardous material?					
		No Yes. Fill in the details.						
26.	Have orde		or administrative proceeding under any e	nvironmental law? Include settlements and				
	لتا	No Yes. Fill in the details.						
P	art 1	1: Give Details About You	ır Business or Connections to Any	y Business				
27.		nin 4 years before you filed for bainess?	nkruptcy, did you own a business or have	any of the following connections to any				
	<ul> <li>✓ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time</li> <li>✓ A member of a limited liability company (LLC) or limited liability partnership (LLP)</li> <li>✓ A partner in a partnership</li> <li>✓ An officer, director, or managing executive of a corporation</li> <li>✓ An owner of at least 5% of the voting or equity securities of a corporation</li> </ul>							
	П	No. None of the above applies. Go	to Part 12.					
	_		d fill in the details below for each business.					
N/A			Describe the nature of the business Investment property	Employer Identification number Do not include Social Security number or ITIN.				
Business Name 1337 E. 233		222md Ctur at	Name of accountant or bookkeeper	EIN:				

Bronx City NY 10466 State ZIP Code From 11/2001 To present

Debtor 1 Debtor 2	Arlene Y. Blair Errol E. Blair				Case numbe	r (if known)	17-1190	00-cam
N/A		Describe the Investment		of the business	Employ	er Identifica	tion numl	<u> </u>
Business Na	me				EIN:	_		
	eimer Avenue	Name of acco	untant	or bookkeeper		- — - —		
Number S	Street			·	Dates b	usiness exi	sted	
					From	8/2005	To	procent
D	NN 4044				FIOIII _	0/2003	_ то_	present
Bronx City	NY 1040 State ZIP C							
Part 12 I have read that answer property be	d the answers on this S ers are true and correc	Statement of Financial A t. I understand that ma with a bankruptcy case	king a f	alse statement, co	ncealing prop	erty, or obta	ining moi	ney or
X /s/ Arie	ene Y. Blair	х	/s/ Err	ol E. Blair				
Arlene `	Y. Blair, Debtor 1		Errol E.	Blair, Debtor 2				
Date _	08/24/2017		Date _	08/24/2017				
Did you at	tach additional pages t	o Your Statement of Fil	nancial .	Affairs for Individu	als Filing for l	Bankruptcy (	Official F	orm 107)?
✓ No ☐ Yes								
Did you pa	ay or agree to pay som	eone who is not an atto	rney to	help you fill out ba	ankruptcy forn	ns?		
<b>☑</b> No								
	lame of person				Attach	the Bankrup	tcy Petitic	on Preparer's Notice,

Declaration, and Signature (Official Form 119).

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK MANHATTAN DIVISION

In re Arlene Y. Blair Errol E. Blair

Case No.	17-11900-cgm
Chapter	13

1.	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR  Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed t	to accept	\$4,500.00				
		I have received					
	Balance Due		<u>\$1,210.00</u>				
2.	The source of the compensation p	paid to me was:					
	☑ Debtor	☐ Other (specify)					
3.	The source of compensation to be	e paid to me is:					
	✓ Debtor	Other (specify)					
4.	I have not agreed to share the associates of my law firm.	e above-disclosed compensation with any other pe	rson unless they are members and				
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.						
5.	In return for the above-disclosed for	ee, I have agreed to render legal service for all asp	pects of the bankruptcy case, including:				
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;						
	b. Preparation and filing of any pe	etition, schedules, statements of affairs and plan w	nich may be required;				
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;						

	CERTIFICATION				
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.					
08/24/2017	/s/ Ethan D. Ganc				
Date	Ethan D. Ganc Law Office of Ethan Ganc	Bar No.			
	99 Madison Avenue				
	Suite 5009				
	New York, NY 10016 Phone: (212) 929-7500 / Fax: (6	646) 626-6410			
/s/ Arlene Y. Blair	/s/ Errol E. Blair				
Arlene Y. Blair	Errol E. Blair				

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK

In Re:	-x Case No. 17-11900-cgm
ARLENE Y. BLAIR and ERROL E. BLAIR,	Chapter 13
Debtor(s)	
VERIFICATION OF CREDITOR	MATRIX/LIST OF CREDITORS
The undersigned debtor(s) or attorned to the creditor matrix/list of creditors submitted herein in knowledge.	ney for the debtor(s) hereby verifies that the s true and correct to the best of his or her
Dated: <b>8/24/17</b>	
	/s/ Arlene Y. Blair Debtor
	/s/ Errol E. Blair Joint Debtor
	Attorney for Debtor

USBC-44 Rev. 11/15

#### Debtor(s): Arlene Y. Blair Errol E. Blair

Case No: 17-11900-cgm Chapter: 13

#### SOUTHERN DISTRICT OF NEW YORK MANHATTAN DIVISION

American Home Mtg Invest. Trust Internal Revenue Service US Attorney, SDNY c/o Ocwen Loan Servicing LLC P.O. Box 7346 1661 Worthington Road, Suite 10 Philadelphia, PA 19101-7346 New York, NY 10007 West Palm Beach, FL 33409

86 Chambers St

AT&T Universal Card P.O. Box 9001037 Louisville, KY 40290-1037

Law Office of Ethan Ganc US Bank Home Mortgage 99 Madison Avenue Suite 5009 New York, NY 10016

4801 Frederica Street Owensboro, KY 42301

AT&T Wireless Services P.O. Box 537104

Marie Miller 1337 E 233rd St Bronx, NY 10466

Verizon P.O. Box 15124 Albany, NY 12212-5124

Bank of America P.O. Box 15019 Wilmington, DE 19886-5019 New York, NY 10038-3735 Bronx, NY 10466

NYC Dept of Finance Wayne and Maxine Davis 66 John St, 3rd Floor 4023 Dereimer Avenue -

4023 Dereimer Avenue - 1st Fl

Capital One P.O. Box 71087 Charlotte, NC 28272-1087

NYS Dept of Taxation & Finance Wells Fargo Home Mortgage Bankruptcy Section P.O. Box 5300 P.O. Box 5300 Albany, NY 12205-0300

P.O. Box 11701 Newark, NJ 07101-4701

Clarfield Okon & Salomone PL Ocwen 114 Old Country Road Mineola, NY 11501

P.O. Box 24738 West Palm Beach, FL 33416-4738

ConEdison Cooper Station P.O. Box 138 New York, NY 10276-0137 Ocwen Loan Servicing LLC P.O. Box 660264 Dallas, TX 75266-0264

Department of Treasury RLF Mortgage Corporation Internal Revenue Service c/o BSI Financial Service Kansas City, MO 64999-0002 P.O. Box 679002

c/o BSI Financial Services Dallas, TX 75267-9002

Discover Credit Card U Promise Card Services P.O. Box 71084 Charlotte, NC 28272-1084

P.O. Box 13337 Philadelphia, PA 19101-3337

Dwight and Norma Thomas U.S. Bank 4023 Dereimer Avenue - 2nd Fl. P.O. Box 790408 Bronx, NY 10466

Saint Louis, MO 63179-0408

Fill in this inf	ormation to ider	ntify your case:	Check as directed in lines 17 and 21:	
Debtor 1	Arlene First Name	<b>Y.</b> Middle Name	Blair Last Name	According to the calculations required by this Statement:
Debtor 2 (Spouse, if filing) United States Ba		E. Middle Name	Blair Last Name TRICT OF NEW YORK	<ul> <li>1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).</li> <li>✓ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).</li> </ul>
Case number (if known)	<u>17-11900-cgm</u>			3. The commitment period is 3 years.  ✓ 4. The commitment period is 5 years.
Official Form	122C-1			Check if this is an amended filing

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

## Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A

Column B

		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$7,493.01	\$11,378.75
3.	Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a	\$0.00	\$0.00

5. Net income from operating a business, profession, or farm

spouse. Do not include payments you listed on line 3.

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$4,475.00	\$0.00			
Ordinary and necessary operating expenses	\$2,900.97	\$0.00	Conv		
Net monthly income from a business,	\$1,574.03	\$0.00	Copy here -	\$1,574.03	\$0.00
profession, or farm	See continuat	ion page(s) for d	letails		

Column A Column B

						Debtor 1	Debtor 2 or non-filing spouse	
6.	Net	income from rental and other r	eal property					
			Debtor 1	Debtor 2				
		ss receipts (before all uctions)	\$0.00	\$0.00				
		inary and necessary operating •	- \$0.00	\$0.00	Сору			
		monthly income from rental or er real property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Inte	rest, dividends, and royalties				\$0.00	\$0.00	
8.	Une	employment compensation				\$0.00	\$0.00	
		not enter the amount if you conte efit under the Social Security Act						
	F	or you		\$0.0	00			
	F	or your spouse		\$0.0	00			
9.		sion or retirement income. Do a benefit under the Social Secur	-	ount received that		\$0.00	\$0.00	
	or p or ir	ount. Do not include any benefits ayments received as a victim of a nternational or domestic terrorism arate page and put the total below	a war crime, a crime . If necessary, list o	against humanity	,			
		al amounts from separate pages,	if any.				+	
11.	Add	culate your total average month lines 2 through 10 for each coluin n add the total for Column A to th	mn.	3.		\$9,067.04	+ \$11,378.75	Total average
В	art 2	Determine How to M	accura Vaur De	advetione from	. Income			monthly income
		Determine How to M  by your total average monthly in						\$20,445.79
		culate the marital adjustment.						Ψ20,773.73
		You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exc necessary, list additional adjust. If this adjustment does not apply	elow. se is filing with you. se is not filing with y listed in line 11, Co n as payment of the luding this income a ments on a separate	ou. Jumn B, that was I spouse's tax liabil and the amount of	ity or the s	pouse's support o	of someone other	
				+		(See (	continuation page.	)
		Total					/ here →	\$0.00
11	Vali	r current monthly income Sul	otract the total in lin	e 13 from line 12				\$20,445,79

	tor 1 tor 2	Arlene Y. Blair Errol E. Blair	Ca	ase number (if known) 17-11900-cgm	
15.	Calcu	late your current monthly income for the year.	Follow these steps:		
	15a.	Copy line 14 here 🔷			\$20,445.79
		Multiply line 15a by 12 (the number of months in a	a year).		X 12
	15b.	The result is your current monthly income for the	year for this part of the form		\$245,349.48
16.	Calcu	ılate the median family income that applies to y	ou. Follow these steps:		
	16a.	Fill in the state in which you live.	New York	_	
	16b.	Fill in the number of people in your household.	6	_	
	16c.	Fill in the median family income for your state and To find a list of applicable median income amoun instructions for this form. This list may also be as	ts, go online using the link spe	ecified in the separate	\$108,798.00
17.	How	do the lines compare?			
	17a. 17b.	Line 15b is less than or equal to line 16c. O under 11 U.S.C. § 1325(b)(3). Go to Part 3.  ✓ Line 15b is more than line 16c. On the top of 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill On line 39 of that form, copy your current more	Do NOT fill out Calculation of page 1 of this form, check be lout Calculation of Your Dis	f Your Disposable Income (Official Form ox 2, <i>Disposable income is determined o</i> posable Income (Official Form 122C-2	122C-2). under
Pa	art 3:	Calculate Your Commitment Period	Under 11 U.S.C. § 132	5(b)(4)	
18.	Сору	your total average monthly income from line 1			\$20,445.79
19.	that c	ct the marital adjustment if it applies. If you are alculating the commitment period under 11 U.S.C. ne, copy the amount from line 13.			
	19a.	If the marital adjustment does not apply, fill in 0 o	n line 19a		\$0.00
	19b.	Subtract line 19a from line 18.			\$20,445.79
20.	Calcu	late your current monthly income for the year.	Follow these steps:		
	20a.	Copy line 19b			\$20,445.79
		Multiply by 12 (the number of months in a year).			X 12
	20b.	The result is your current monthly income for the	year for this part of the form.	<u>_</u>	\$245,349.48
	20c.	Copy the median family income for your state and	I size of household from line 1	6c	\$108,798.00
21.	How	do the lines compare?			
	_	Line 20b is less than line 20c. Unless otherwise or check box 3, <i>The commitment period is 3 years</i> . G		of page 1 of this form,	
		Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period i</i>		t, on the top of page 1	
Pa	art 4:	Sign Below			
	By sig	gning here, under penalty of perjury I declare that t	ne information on this stateme	nt and in any attachments is true and co	orrect.
		/ Arlene Y. Blair lene Y. Blair, Debtor 1	X <u>/s/ Errol l</u> Errol E. Bl	<b>E. Blair</b> air, Debtor 2	
	Da	ate 8/24/2017 MM / DD / YYYY	Date <u>8/2</u> . MM	<b>4/2017</b> / DD / YYYY	

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Case number (if known) 17-11900-cgm

## 5. Net income from operating a business, profession, or farm (details):

Debtor 1 / Debtor 2	Description (if available)	Average Monthly Amount
Debtor 1	1337 E 233rd Street	
Gross receipts (before all deductions)		\$1,825.00
Ordinary and necessary operating expe	enses	\$2,063.33
Net monthly income from a business, p	rofession, or farm	(\$238.33)
Debtor 1	4023 Dereimer Avenue	
Gross receipts (before all deductions)		\$2,650.00
Ordinary and necessary operating expe	enses	\$837.64
Net monthly income from a business, p	rofession, or farm	\$1,812.36

## 13. Marital Adjustment (continued):

State each purpose for which the income was used  Amount t
------------------------------------------------------------

Fill in this inf	formation to id	lentify your case	:	
Debtor 1	Arlene	Y.	Blair	
	First Name	Middle Name	Last Name	
Debtor 2	Errol	E.	Blair	
(Spouse, if filing)	) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for	the: <b>SOUTHERN D</b>	ISTRICT OF NEW YORK	
Case number	17-11900-cgm			
(if known)				Check if this is an amended filing

### Official Form 122C-2

## Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

6

#### National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$2,300.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age \$49.00 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 Copy \$294.00 \$294.00 7c. Subtotal. Multiply line 7a by line 7b. People who are 65 years of age or older \$117.00 7d. Out-of-pocket health care allowance per person 7e. Number of people who are 65 or older Copy \$0.00 Subtotal. Multiply line 7d by line 7e. \$0.00 here Copy \$294.00 here -\$294.00 Total. Add lines 7c and 7f.....

\$2,199.00

**Local Standards** 

You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities -- Insurance and operating expenses
- Housing and utilities -- Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

**8. Housing and utilities -- Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.

\$907.00

- 9. Housing and utilities -- Mortgage or rent expenses:
  - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.
  - 9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment			
American Home Mtg Invest. Trust 2005-1	\$1,951.00			
RLF Mortgage Corporation	\$409.92			
US Bank Home Mortgage	+ \$1,803.37			
(See continuation page.)		Сору		Repeat thi
9b. Total average monthly payment		here 👈	 \$4,655.64	line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$0.00	Copy here →	

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain	
⊏xpiain	 
why:	

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- ✓ 1. Go to line 12.
- 2 or more. Go to line 12.
- **12. Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

\$299.00

\$0.00

**13. Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

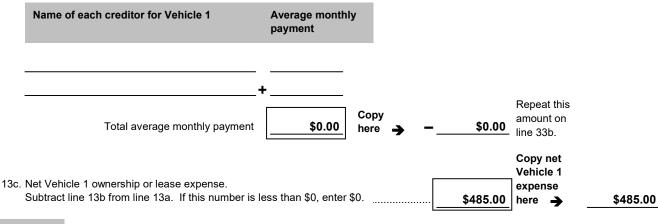
Vehicle 1
-----------

#### Describe Vehicle 1:

- 13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.



## Vehicle 2

#### Describe Vehicle 2:

- 13d. Ownership or leasing costs using IRS Local Standard. .....
- 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthl payment	у	
Total average monthly navment		Сору	
Total average monthly payment  Net Vehicle 2 ownership or lease expense.  Subtract line 13e from 13d. If this number is less	than \$0 enter \$0	here →	

- **14.** Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.
- **15.** Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

\$0.00

\$0.00

\$0.00

13f.

Case number (if known) 17-11900-cgm

Othe	er Necessary Expenses	In addition to the exp following IRS categor		isted above, you a	are allowed your monthly expe	nses fo	r the
16.	Taxes: The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.						\$5,899.76
17.	<ul> <li>Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.</li> <li>Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.</li> </ul>						
18.	3. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						\$0.00
19.	9. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.						
20.	Education: The total monthly  ■ as a condition for your job		for education tha	t is either required	:		\$0.00
	for your physically or ment						
21.	<b>Childcare:</b> The total monthly Do not include payments for a				aycare, nursery, and preschool	ol.	\$0.00
22.	Additional health care expe is required for the health and health savings account. Inclu Payments for health insurance	welfare of you or your ude only the amount th	dependents and nat is more than the	that is not reimbur ne total entered in	sed by insurance or paid by a line 7.		\$0.00
23.	Optional telephones and tel for you and your dependents, phone service, to the extent r of income, if it is not reimburs Do not include payments for t expenses, such as those repo	such as pagers, call valuecessary for your headed by your employer.	waiting, caller ider alth and welfare or , internet and cell	ntification, special that of your dependence service.	long distance, or business ce ndents or for the production o not include self-employmen	II .	\$0.00
24.	Add all of the expenses allo Add lines 6 through 23.	wed under the IRS e	xpense allowand	es.			\$10,651.19
Add	itional Expense Deductions			allowed by the Mea allowances listed			
25.	Health insurance, disability insurance, disability insurance spouse, or your dependents.					l	
	Health insurance		\$113.40				
	Disability insurance		\$0.00				
	Health savings account	+	\$0.00				
	Total		\$113.40	Copy total here	<b>→</b>		\$113.40
	Do you actually spend this tot	tal amount?					
	<ul><li>No. How much do you a</li><li>✓ Yes</li></ul>	ctually spend?					
26.	6. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).					\$0.00	
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.  By law, the court must keep the nature of these expenses confidential.					\$0.00		

ebto ebto		Arlene Y. Blair Errol E. Blair	17-11900-cgn	n					
28.	Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.								
	•	believe that you have home er, then fill in the excess amount	nergy costs that are more than the of home energy costs.	ne home energy costs i	ncluded in exper	ises on			
		nust give your case trustee doc int claimed is reasonable and n	cumentation of your actual exper ecessary.	nses, and you must sho	ow that the addition	onal			
29.	<b>Education expenses for dependent children who are younger than 18.</b> The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.								
		0 ,	cumentation of your actual exper y and not already accounted for		olain why the amo	ount			
	* Sub	ject to adjustment on 4/01/19, a	and every 3 years after that for c	ases begun on or after	the date of adjus	stment.			
30.	highe	r than the combined food and o	clothing allowances in the IRS N	The monthly amount by which your actual food and clothing expenses are ning allowances in the IRS National Standards. That amount cannot be more nees in the IRS National Standards.					
			n additional allowance, go online may also be available at the ba		ed in the separate	•			
	You n	nust show that the additional ar	mount claimed is reasonable and	d necessary.					
31.		_	s. The amount that you will cor le organization. 11 U.S.C. § 54		ne form of cash o	r financial 🛛 🕂	\$0.00		
		•	n 15% of your gross monthly inc	come.					
32.	Add all of the additional expense deductions.  Add lines 25 though 31.								
Ded	uction	ns for Debt Payment							
33.	For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.								
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.								
					rage monthly ment				
	220	Mortgages on your home			\$4,655.64				
	эза.	• •	ialaa	······································	Ψ1,000.01				
	22h	Loans on your first two vehi			\$0.00				
	33b.				\$0.00				
	33c.	.,		······································	Ψ0.00				
	33d.	List other secured debts:	1.1	D					
		e of each creditor for secured debt	Identify property that secures the debt	Does payment include taxes or insurance?					
				□ No					
				Yes					
				D No					
				Yes					
				j	A4.5== = :	Copy total			
	33e.	Total average monthly payme	nt. Add lines 33a through 33d		\$4,655.64	here -	\$4,655.64		

Debto	or 2 <u>Err</u>	ol E. Blair			Case r	number (if known)	<u>17-11900-cg</u>	m
34.	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?							
	□ No. ✓ Yes.	•	unt that you must pay to a cred your property (called the cure a				•	
Nar	ne of the cı	reditor	Identify property that secures the debt	Total cure amount		Monthly cure amount		
					÷ 60 =			
					÷ 60 =			
			-		÷ 60 = 📮	<b>-</b>	Copy total	
					Total	\$0.00	here -	\$0.00
35.		that are past du	claimssuch as a priority tax e as of the filing date of you					
	✓ No.	Go to line 36.						
	Yes.		amount of all of these priority on the priority claims, such as the control of the priority claims, such as the control of the priority of the					
		Total amount o	f all past-due priority claims				÷ 60 =	\$0.00
36.	Projected monthly Chapter 13 plan payment					\$1,800.00		
	Office of the	he United States	district as stated on the list issa Courts (for districts in Alabam United States Trustees (for al	na and North Carolina				
	specified i		tipliers that includes your distrinstructions for this form. This I			x5.9	%	
	Average n	nonthly administr	rative expense			\$106.20	Copy total here	\$106.20
37.		the deductions 33g through 36.	for debt payment.					\$4,761.84
Tot	al Deductio	ons from Income	)					
38.	Add all of	the allowed dec	ductions.					
	Copy line	24, All of the exp	penses allowed under IRS exp	oense allowances		\$10,651.19		
	Copy line	32, All of the add	ditional expense deductions			\$113.40		
	Copy line	37, All of the dec	ductions for debt payment		+	<u>\$4,761.84</u>		
	Total dedu	uctions				\$15,526.43	Copy total here	\$15,526.43
Pa	rt 2: D	etermine Vo	ur Disposable Income U	Inder 11 II S C	8 1325/h)	1(2)		
			nonthly income from line 14			/\ <i>~)</i>		
JJ.			nt Monthly Income and Calcu					\$20,445.79

Debtor 1

Arlene Y. Blair

Debto Debto			Y. Blai E. Blair	r		Case number (if known	) <b>17-11900</b>	-cam
40. Fill in any reasonably necessary income you receive for support of d. The monthly average of any child support payments, foster care payment disability payments for a dependent child, reported in Part 1 of Form 1220 you received in accordance with applicable nonbankruptcy law to the externasonably necessary to be expended for such child.		, foster care payments, or n Part 1 of Form 122C-1, t cruptcy law to the extent	ndent children.		· ·			
41.	41. Fill in all qualified retirement deductions. The monthly total of all amounts the your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).							
42.				s allowed under 11 U.S.C. §		<b>→</b> \$15,526.43	-	
43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.								
	Desc	cribe th	e specia	l circumstances	Amount of expense			
					+			
				To	$\mathcal{L}$	Copy nere → + \$0.00		
44.	Total	adjustm	nents. /	add lines 40 through 43		<b>→</b> \$16,569.69	Copy here	\$16,569.69
45.	Calcu	late you	ur month	ly disposable income under	r <b>§ 1325(b)(2).</b> Subtract li	ne 44 from line 39.		\$3,876.10
Pa	rt 3:	Cha	nge in	Income or Expenses				
46.	virtual inform	ly certai ation be in the se	n to char elow. Foi	expenses. If the income in Finge after the date you filed you example, if the wages report lumn, explain why the wages	ur bankruptcy petition and ed increased after you file	during the time your case we discourage the discourage tition, check 122C	vill be open, i -1 in the first	fill in the column, enter
	Forn	n	Line	Reason for change		•	crease or ecrease?	Amount of change
	بغا	122C-1 122C-2	5	Resumption in payment	of mortgage to Ocwe	8/1/17	Increase Decrease	\$2,300.00
	_	122C-1 122C-2					Increase Decrease	
		122C-1 122C-2				F	Increase Decrease	
		122C-1 122C-2					Increase Decrease	

Debtor 1 Debtor 2	Arlene Y. Blair Errol E. Blair	Case number (if known) 17-11900-cgm					
Part 4:	Sign Below						
By s	igning here, under penalty of perjury you decla	are that the information on this statement and in any attachments is true and correct.					
<b>X</b> /:	s/ Arlene Y. Blair	✗ /s/ Errol E. Blair					
/\ <del>.</del>							
X =	rlene Y. Blair, Debtor 1	Errol E. Blair, Debtor 2					

Debtor 1 Arlene Y. Blair
Debtor 2 Errol E. Blair

Case number (if known) 17-11900-cgm

## 9b. Mortgages and other debts secured by your home (continued):

Name of the	ne creditor	Average monthly payment

**Wells Fargo Home Mortgage** 

\$491.35